U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	, p.	COURT CASE NUMBE	ER .
SANDY J. BATTISTA	1	65-05-11456-DF	
DEFENDANT		TVDE OF PROCESS	
ROBERT MURPHY, Superintenden	t 15 -11 -	3 26 civir	
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION	N, ETC., TO SERVE OR	DESCRIPTION OF PROPERTY TO	SEIZE OR CONDEMN
Mass. Treatment Center	A R. MSTMM	11001	
ADDRESS (Street or RFD, Apartment No., City, State	e and ZIP Code)	4.30	
AT 30 Administration Rd., Bridgewat	er, Mass. 0232	24-3230	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND A	ADDRESS BELOW:	1	T
		Number of process to be served with this Form - 285	1
Sandy J. Battista, #M-15930			· · · · · · · · · · · · · · · · · · ·
Mass. Treatment Canter		Number of parties to be	6
30 Administration Rd.	^	served in this case	
Bridgewater, Mass. 02324-323	(.)	Check for service	
		on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL AS	SIST IN EXPEDITING	SERVICE (Include Business' and	Alternate Addresses All
Telephone Numbers, and Estimated Times Available For Service):		1.1	Fold
Defendant is the current Super	fotordont as	the Mace to	. Tolu
Treatment Center.	intendent ur	640 (355 C)	
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		· 10	\
		- U	
Signature of Attorney or other Originato requesting service on behalf of:	₩ PLAINTIFF	TELEPHONE NUMBER	DATE
South 1. Delta	☐ DEFENDANT	N/A	7/19/05
Jan Cy II Land			
SPACE BELOW FOR USE OF U.S. MARSHA	T ONIX — DO	NOT WRITE BELO	W THIS LINE
I acknowledge receipt for the total Total Process District District	Signature of Authori	zed USMS Deputy of Clerk	Date
number of process indicated. (Sign only first USM 285 if more)	Dear 1	7. 0	7/20/14
than one USM 285 is submitted) No. 38 No. 38	rasey	- Carretter	HAGE U
I hereby certify and return that I have personally served, have legal eviden			
on the individual, company, corporation, etc., at the address shown above or or	the individual, company,	corporation, etc., shown at the add	lress inserted below.
. I hereby certify and return that I am unable to locate the individual, c	ompany, corporation, etc	., named above (See remarks belo	ow)
Name and title of individual served (if not shown above)		A person of	suitable age and dis-
Tarrica 1. +p	\wedge	cretion then re	esiding in the defendant's
JESSICH DUTC	<u> </u>	usual place o	
Address (complete only if different than shown above)		Date of Service	Time am
		3/00	50 pm
		Signature of V.S.	Marshal or Deputy
		Loto	cell
Service Fee Total Mileage Charges Forwarding Fee Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
(including endeavors)	1		~~~~
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REMARKS:		}	$\overline{-1}$
		/:	:5 hr
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LIMITED STATES DISTRICT COLDT

UNITED STATES DISTRICT COURT
District of MASS A chusetts
Sandy J. Battista V. Plaint. H SUMMONS IN A CIVIL CASE
Kathleen Dennehy, etal CASE NUMBER: CA. 05-11436-DPW Defendants
TO: (Name and address of Defendant)
Robert Murphy, Superintendent MASS- Treatment Center 30 Administration 2d- Bridgewater MASS- 02324-3230 YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)
Sundy J. Battista, pro-se #11-15930 MASS. Trentment Center 30 Administration Rd. Bridgewater, MASS. 02324-3230
an answer to the complaint which is herewith served upon you, within
Sarah A. Thornton CLERK DATE TISSAGNUSE DATE